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|---|---|-------------------------------|------------|--|------------------|---------------------------------------|------------------------|----------|----------------------------|------------------------|
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2) | | | | | | SMALL ENTITY | | OR · | OTHER THAN SMALL ENTITY | |
| | FOR | NUMBER | FILED | NUMBER | REXTRA | RATE | FEE | | RATE | FEE ' |
| BASIC FEE 737 CFR 1.16(a)) | | | | | _ | | s | OR | | 27000 |
| TOTAL CLAIMS (37 CFR 1.16(c)) | | | | | 2 | x s= | | OR | x s= | 216 |
| NDEPENDENT CLAIMS 37 CFR 1.16(b)) minus 3 = | | | | | | x s= | | OR | X \$= | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | | | + s= | | OR ' | + \$= | -0. |
| . it n | e difference in colum | n 1 is less than | zero, ente | er "0" in column 2 | TOTAL | | OR. | TOTAL | 486 | |
| | CLAIM | MS AS AMEI | NDED - | - PART II | 1 1 | | | | | |
| | (Column 1) (Column 2) (Column 3) | | | | | SMALL E | NTITY | OR | | THAN . |
| ۲ ا | MAPIN R | CLAIMS, EMAINING AFTER | | HIGHEST NUMBER PREVIOUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL | | RATE | ADDI |
| COMENT | Total A | AENDM-M! | Minus | · PAID FOR -> | = 419 7 10 | 125 | FEE , | (Pe i | - (50= | FEE |
| | (37 CFR 1.16(c)) | 00 | Minus | O | = | x \$0 <u>00</u> = | | OR . | - 201 | D(N00) |
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| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | TOTAL | | OR OR | TOTAL ADD'L FEE | 2000 |
| | | | | | | ADD'L FEET | L |] (),(| ADDETEC | 4.00 |
| | ((| Column 1) | | (Column 2) HIGHEST | (Column 3) | | | 1 | | |
| ENT B | | EMAINING AFTER MENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| MONE | (37 CFR 1.40(c)) | | Minus | •• | = | × 5 | | on | | |
| | Independent . | | Minus | | = | · · · · · · · · · · · · · · · · · · · | | , Ou | * × Š = | |
| ΣX | FIRST FRESENTATION OF INJUTIPLE DEPENDENT CLAIM (477-CFP-4-16/44) | | | | | +5= | | OP* | 1 1 2 2 1 1 1 | <u> </u> |
| | | | | | | TOTAL ADD'L FEE | | OR " | TOTAL ADD'I, FEE | |
| | . (| Column 1) | | (Column 2) | (Column 3) | | | _ | , , | |
| .: C | | CLAIMS REMAINING AFTER | | HICHCOTT HUMBER PREMOUSLY HAD LOS | PRESERT EXTEA | RATE | ADD. Selata | | HAII | ADD TRIBUAL |
| AMENDIJEL | Trate! | TA, BORDERT | Miners | | - ' | | : | | | |
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| AiM | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR (1566) | | | | | 4 S 7 | | inte | | |
| | | | | | | TOTAL ADD'T, FEE | | OR | TOTAL ADD'I FEL | |
| | | on 1 ie lace tha | n the entr | vio column 2. wo | de 101 in column | 3. | | | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete; including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chef Information Officer, U.S. Patent and-Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS -ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

in the entry in column in its less than the entry in column 2, while it in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.